

TITLE III ADULT DAY SERVICES

1.0 SERVICE DEFINITION

- 1.1 A therapeutic program for four or more functionally impaired adults who reside in the community and are appropriate for adult day services. The program provides health supervision and therapeutic activities in a group setting by professionally qualified staff. The program provides a more comprehensive level of care than center-based social and recreational services, but is less comprehensive than that provided in an intermediate care facility. The service is designed for persons who can not live independently and might otherwise be institutionalized.

2.0 SERVICE GOAL

- 2.1 The goal of the adult day services program is to create a therapeutic environment in which functionally impaired persons maintain maximum functioning and independence, while preventing early institutionalization. To obtain this goal, the program must provide high quality programming for the participants and support and information for the caregivers.

3.0 SERVICE UNIT

- 3.1 The unit of service for adult day services is one (1) day of service for one (1) participant. At a minimum, participants should be scheduled for at least two (2) days a week, with scheduled attendance based on a full day of services.
- 3.2 If the program provides transportation, the adult day service begins when the participant is picked up at his/her home and ends when returned to his/her home. In order to maximize time in the center, transportation routes should be limited to one hour. If transportation is not provided, the day begins when the participant enters the facility and ends when he/she leaves.

4.0 SERVICE AREA

- 4.1 Adult Day Services are available to all eligible residents of the State of Delaware.
- 4.2 Providers of Adult Day Services are permitted to apply for sub-areas of service within the state.

5.0 ELIGIBILITY

- 5.1 To be eligible for adult day services, the participant:
 - 5.1.1 Must be sixty (60) years of age or older
 - 5.1.2 Must be a resident of the State of Delaware
 - 5.1.3 Must be able to benefit from the program
 - 5.1.4 Must have documentation of a recent medical examination (within the last 6 months) certifying that the participant is free of contagious diseases

- 5.1.5 Must be assessed as requiring intermediate care (i.e., needing assistance with activities of daily living (ADL's) and/or assistance with prescribed medications)
- 5.1.6 Must be unable to be left alone at home
- 5.1.7 Must live with a caregiver who either works outside the home or needs temporary relief from caregiving
- 5.1.8 Must be considered appropriate for adult day services as indicated by the participant's functional assessment score.
- 5.2 Priority will be given to those participants who are:
 - 5.2.1 At risk of institutionalization
 - 5.2.2 On a waiting list for a bed in a nursing home
 - 5.2.3 Referred by a hospital, doctor, or geriatric case manager
 - 5.2.4 Are low-income individuals, including low-income minority individuals
 - 5.2.5 Have limited English speaking proficiency
 - 5.2.6 Residing in rural areas
- 5.3 The Adult Day Services program does not serve participants who are:
 - 5.3.1 Assessed as capable of living independently, using the functional assessment tool;
 - 5.3.2 Assessed as requiring skilled nursing care (i.e. 24-hour nursing care);
 - 5.3.3 Assessed as capable of functioning in a less restrictive environment (i.e., senior center);
 - 5.3.4 Currently residing in a nursing home or who is publicly subsidized in an assisted living facility or publicly subsidized foster care home.

6.0 SERVICE STANDARDS

- 6.1 Adult day services centers must be licensed as an Adult Day Care facility in Delaware.
- 6.2 Adult day services must meet or exceed the standards listed below:
 - 6.2.1 Must comply with all applicable federal, state, and local laws, rules, policies, regulations and standards.
 - 6.2.2 The facility shall be open for operation at a minimum of eight (8) hours per day.
 - 6.2.3 The facility shall provide appropriate and locked storage for all medications stored at the center.
 - 6.2.4 Through participant/caregiver interview and observation, the adult day service provider will complete a functional assessment of the participant's social circumstances, economic conditions, medical history, physical status, mental status, and ability to perform the activities of daily living (ADL), prior to admission, to determine if the applicant is appropriate for adult day services.
 - 6.2.5 The provider will develop a written detailed care plan on each new participant within thirty (30) working days of enrollment that addresses the needs as identified in the functional assessment.

- 6.2.6 The provider will reassess participants every six (6) months or earlier if their needs change. The plan of care will be reviewed/updated at that time.
- 6.2.7 The participant/caregiver should be included in the development of the care plan whenever possible.
- 6.2.8 The provider will maintain notes depicting the participant's progress in the program, beginning with the first day of service and ending with the circumstances and date of discharge.
- 6.2.9 Participant admission will be viewed as a 30-day trial basis for both parties, at which time a decision will be made about the participant's continued attendance.
- 6.2.10 When a participant's needs no longer require or can no longer be met by the program and staff, discharge will be discussed with the caregiver.
 - 6.2.10.1 A 30-day written notice will be given to the caregiver when possible.
- 6.2.11 The provider must have written procedures for handling emergencies and participant/family preference regarding emergency care and ambulance transportation.
- 6.2.12 Information and referral to other programs for which the participant might be eligible, referring the participant to proper services as necessary and providing assistance to the participant in gaining public benefits.
- 6.2.13 The provider must have written notice displaying fire procedures and emergency evacuation routes.
- 6.2.14 The provider will notify the participant's family and physician, if necessary, of changes observed in the health status of a participant.
- 6.2.15 The provider will give health education/counseling to participants and families/caregivers.

6.3 **Allowable Services**

- 6.3.1 Services include, but are not limited to:
 - 6.3.1.1 Health monitoring
 - 6.3.1.2 Medication administration and monitoring
 - 6.3.1.3 Daily nutritious meals and snacks
 - 6.3.1.3.1 Main meal should be well balanced and provide one-third of the Recommended Daily Allowance
 - 6.3.1.3.2 Breakfast and lunch may be provided
 - 6.3.1.4 Dietary supervision
 - 6.3.1.5 Provision of special diets, based on physician's orders, prepared through consultation with a qualified dietitian or nutritionist, when possible
 - 6.3.1.6 Social, recreational, physical, rehabilitative, or other activities/therapies as part of the plan of care
 - 6.3.1.7 Opportunities for walking in a safe environment

- 6.3.1.8 Continued contact with the community, through outings, when appropriate
- 6.3.1.9 Assistance with activities of daily living (ADL) skills, as needed
- 6.3.1.10 Transportation coordination, when possible
- 6.3.1.11 Caregiver support groups and opportunities for caregivers to improve their care-giving skills which may include meetings, counseling, information and education
- 6.3.1.12 Social service referrals, as needed
- 6.3.1.13 Social activities that include: art, music, fitness exercise, gardening, mental stimulation historic recall, cooking, games, outings, reminiscence activities, etc.
 - 6.3.1.13.1 Activities are provided on both a group and individual basis
 - 6.3.1.13.2 Activities are to be designed to give purpose and meaning to daily life
- 6.3.1.14 Encouragement of appointments with health professionals such as speech, physical, or occupational therapists, if necessary.

6.4 **Prohibited Activities**

- 6.4.1 Provision of nursing care, unless by a RN or LPN
- 6.4.2 Provision of care outside of the adult day services facility, other than outings
- 6.4.3 Provision of medical services, unless provided by an MD
- 6.4.4 Provision of services to a participant who is a resident of a nursing home, foster care home, or assisted living facility
- 6.4.5 Provision of individual, group, or family counseling unless provided by a degreed professional with formal training in counseling
- 6.4.6 Provision of services to out-of-state residents

6.5 **Staff Requirements**

- 6.5.1 The Adult Day Care Center Director shall meet the following criteria:
 - 6.5.1.1 Possession of a Bachelor's Degree in health or social services or a related field, with one (1) year of supervisory experience (full-time or equivalent) in a social or health service setting; have comparable technical and human service training with demonstrated competence OR
 - 6.5.1.2 Be a registered nurse with two (2) years of supervisory experience (full-time or equivalent) in a social or healthcare setting

6.5.2 Paid staff and volunteers must demonstrate the following:

6.5.2.1 The sanitary handling of food

6.5.2.2 Fire safety

6.5.2.3 Basic first aid with an emphasis on choking and coronary attacks

7.0 WAITING LISTS

7.1 When the demand for a service exceeds the ability to provide the service, a waiting list is required. Applicants will be placed on the waiting list until services can be provided; or, until the applicant no longer desires services. The waiting list must be managed in accordance with DSAAPD policy X-K, Client Waiting Lists. In all cases, the reason for the selection of an individual ahead of others on the waiting list must be documented (e.g. in writing and available for review).

8.0 CALCULATION FOR NUMBER OF SERVICE UNITS

8.1 The following calculations shall be used to determine the number of service units for Adult Day Services.

8.1.1 The program must first establish a minimum number of operating days per year using the following:

Example:

| | |
|------------|--|
| 365 | days per year |
| -104 | (less 104 weekend days) |
| - 12 | (less 12 holidays) |
| <u>- 5</u> | (less 5 days for weather, miscellaneous) |
| 244 | operating days per year |

8.1.2 After establishing the number of operating days (using the example in 8.1.1) use the following formula to determine the number of service units:

of oper. days/year x average daily census = # of service units.

Example:

| | |
|-------------|-------------------------|
| 244 | operating days per year |
| <u>x 25</u> | participants per day |
| 6,100 | service units. |

9.0 INVOICING REQUIREMENTS

- 9.1 The provider will invoice DSAAPD pursuant to the DSAAPD Policy Manual for Contracts, policy X-Q, Invoicing.
- 9.2 The following information will also be included on the invoice:
 - 9.2.1 Number of operating days eligible for payment for the billing period.
 - 9.2.2 Participant legal name.
 - 9.2.3 Service Units provided per participant.
 - 9.2.4 Total Service Units provided.
 - 9.2.5 Service Unit Cost.
 - 9.2.6 Service Unit Reimbursement Rate.
 - 9.2.7 Total DSSAPD funds earned.
 - 9.2.8 Program Income Collected.

10.0 DONATIONS

- 10.1 Participants, family members, and/or caregivers must be informed of the cost of providing adult day services and must be offered the opportunity to make voluntary contributions to help defray the cost, thereby making additional service available to others.
- 10.2 Providers must have procedures in place to:
 - 10.2.1 Inform applicants, family members and/or caregivers of the cost of providing adult day services and offer them the opportunity to make a voluntary contribution/donation
 - 10.2.2 Protect their privacy with respect to the contribution/donation
 - 10.2.3 Safeguard and account for all contributions/donations
 - 10.2.4 Use the contributions/donations to expand services
- 10.3 Programs that receive meals through a Title III-C Nutrition Program may use the collection box for Title III-C contributions/donations and collect contributions/donations for Title III-B funds separately.

TITLE III-B ADULT DAY SERVICE

PLANNED SERVICE UNITS AND PROPOSED OBJECTIVES

GRANTEE / AGENCY NAME: _____

PROGRAM NAME: _____

| PLANNED SERVICE UNITS | 1st Qtr | 2nd Qtr | 3rd Qtr | 4th Qtr | Total |
|---|--------------------|--------------------|--------------------|--------------------|--------------|
| 1. Number of service units | | | | | |
| 2. Number of unduplicated participants served by the program | | | | | |
| 3. Number of participants assessed in person (including those not admitted) | | | | | |
| 4. Number of plans of care developed | | | | | |
| 5. Number of plans of care updated | | | | | |
| 6. Number of meals provided | | | | | |
| 7. Number of one-way trips | | | | | |
| 8. Number of hours provided by volunteers | | | | | |
| 9. Program Income | | | | | |

* Definitions of the above categories found in the Quarterly Performance Report Instructions.